

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000003829

FILED  
Mar 24, 2003  
Secretary of State

Entity Name: FOG PASADENA, INC.

## Current Principal Place of Business:

6085 LAKE FORREST DRIVE  
300-D  
ATLANTA, GA 30328 US

## New Principal Place of Business:

## Current Mailing Address:

6085 LAKE FORREST DRIVE  
300-D  
ATLANTA, GA 30328 US

## New Mailing Address:

FEI Number: 59-3300906

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLER, MARK E  
3802 S. WESTSHORE BLVD.  
TAMPA, FL 33611 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HACKNER, MARK O  
Address: 6085 LAKE FORREST DRIVE, #300-D  
City-St-Zip: ATLANTA, GA 30328

Title: D ( ) Delete  
Name: RICE, MITCHELL F  
Address: 1745 WEST FLETCHER AVE.  
City-St-Zip: TAMPA, FL 33612

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK O. HACKNER

PRES

03/24/2003

Electronic Signature of Signing Officer or Director

Date